

Conversation guide for Rx:PLAY

V1

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(If using another tool for data gathering, this form is only a guide and you do not need to write)

Name of child _____ Date of prescription _____

Name of parent/guardian _____

Address (incl. city, state, zip) _____

Email address _____

Business/cell phone _____

Home phone _____ Best time to call _____

Referring system/location _____ Referring clinician _____

Language _____

Note: provide information about scholarship program at any point where it seems that cost is a potential barrier.

Step 1

Making the call:

Date _____ Time _____ Initials of caller _____

Result of first call

- no answer
- voice message left
- call back at/talk to _____ (date/time/person)

If no answer on first call, results for second call

Date _____ Time _____ Initials of caller _____

Result

- no answer
- voice message left
- call back at/talk to _____ (date/time/person)

If no answer on second call, results for third call

Date _____ Time _____ Initials of caller _____

Result

- no answer
- voice message left
- call back at/talk to _____ (date/time/person)

Step 2

Starting the conversation

Hello, my name is [your name], from [recreation system]. I am calling regarding Rx:PLAY, the prescription that [child] received from [prescription writer]. May I speak with [parent identified on Rx] or another caregiver?

Name of person talked to _____ Relationship to child _____

Is this a good time to talk? It will just take a few minutes of your time.

If no, callback day/time/person specified _____

[Prescription writer] thought it was important that [child] be more physically active in order to be as healthy as possible, and we're here to help. That is why [prescription writer] not only wrote the prescription, but also asked for your permission to have us call you to talk about the programs that we offer right here in the community at low cost.

Step 3

Location and familiarity

May I verify that you live at [address]? Do you think our [facility name and location] would be a convenient location for your family?

- Yes
- No or unsure (gather info about what loc would work best) _____

Have you previously enrolled in programs available through [recreation system]?

- Yes
- No or unsure (describe recreation system and location as needed)

How old is [child]? _____

And is [child] a boy or girl? _____

Step 4

Activity ideas

When [child] met with [prescription writer], [child] expressed an interest in doing [activities] (from the Rx). What are your thoughts about [child] doing these activities?

Reaction (Positive? Negative? Doubtful?) _____

(If negative or doubtful, choose any appropriate questions to get more info)

What other activities do you think [child] might enjoy?

What does [child] typically do outside of school?

What does [child] like to do with his/her friends, neighbors or family?

What does your family like to do outside?

Any useful info _____

I have an idea about programs which might be just what you want. But first, is there anything else you would like to share about [child] or your family to help us find a great program for you?

Their information _____

Here is an idea for you (1-2 options depending on how clear they are about what they want)
_____ (class/program) or _____ (alternate)

Step 5

Check for interest

Do you think this (or either of these) sounds like something you would choose?

- Yes
- No (if no, explore more options or jump to closing, as appropriate)

*It sounds like _____ (class/program) at _____ (location)
would be a good fit for [child]. Registration is easy. Would you like me to do this with you
while we are on the phone?*

- Yes (complete registration)
- No OK. How can I help you further?
 - Send a catalog
 - Information about scholarship program
 - Have [location] give you a call to discuss local programs
 - Direct you to our website
 - Call back at _____ (date/time)
 - No further help needed at this time
 - Other _____

Step 6

Check for other possible participants

Many kids find it helpful to have friends or family participate along with them to support their activities. Is there anyone else in the family, such as siblings or parents, who might also like to join one of our programs, or can I send you an additional catalog for a friend or neighbor?

- Yes, additional person and class _____
- Send additional catalog
- Not at this time/Will consider

Step 7

Thanks and closing

Thank you so much for your time [person talked to]. If you have any further questions about Rx:PLAY or our [recreation system], please give us a call at [phone number].

Other

Was there any indication that finances would be a barrier?

- Yes
- No